823901



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR



07079829

SEC USE ONLY						
Prefix	Serial					
	ATE RECEIVED					
,	1					

UNIFURM LIN	WITED OFFERING EX	KEMPTION			
Name of Offering (check if this is an amendment and Private Placement of Limited Partnership Interests of Atlas Cap	name has changed, and indicate pital, L.P.	change.)			·
Filing Under (Check box(es) that apply): Rule 504 Rule 504	ile 505 🗵 Rule 506	Section 4(6)	ULOE	P	ROCESSE
Type of Filing: New Filing Amendment					
	A. BASIC IDENTIFICATION	ON DATA		Q (CT 2 2 2000
Enter the information requested about the issuer Name of Issuer (-1			2007
Atlas Capital, L.P.		cnange.)			THOMSON
	ity, State, Zip Code)		Telephone N	umber (Includin	g Area Code)
100 Crescent Court, Suite 380, Dallas, Texas 75201			(214) 999-6		
Address of Principal Business Operations (No. and Street, C (if different from Executive Offices)	ity, State, Zip Code)	Telephone Numb	er (Including A	rea Code)	
Brief Description of Business Investment Partnership			<u> </u>		
Type of Business Organization				_	
corporation	limited partnership, ali	ready formed			other (please specify):
business trust	limited partnership, to	be formed			
Actual or Estimated Date of Incorporation or Organization:	M	onth 9	Year 9 5	⊠ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-lette	er U.S. Postal Service abbreviat	tion for State: TX			
CN for Cana	da; FN for other foreign jurisdi	ction)			
GENERAL INSTRUCTIONS		-			
Federal: Who Must File: All issuers making an offering of securities in reliance on an exempt	ion under Regulation D or Section 4(6), I	17 CFR 230 501 et seq. o	r 15 U.S.C. 77d(6).		
When To File: A notice must be filed no later than 15 days after the first sale of se received by the SEC at the address given below or, if received at that address after the	curities in the offering. A notice is deen	ned filed with the U.S. S	ecurities and Exchan	ge Commission (SE)	C) on the earlier of the date it is
Where To File; U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., V.		,	•		
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of visignatures.	which must be manually signed. Any cop	ies not manually signed	must be photocopies	of the manualty sign	ed copy or bear typed or printed
Information Required: A new filling must contain all information requested. Amer changes from the information previously supplied in Parts A and B. Part E and the A		e issuer and offering, an	y changes thereto, th	e information reque	sted in Part C, and any material
Filing Fee; There is no federal filing fee					
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemust file a separate notice with the Securities Administrator in each state where sale amount shall accompany this form. This notice shall be filed in the appropriate state	s are to be, or have been made. If a state	requires the payment of	a fee as a preconditi	on to the claim for th	e exemption, a fee in the proper

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97)

predicated on the filing of a federal notice.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is

_		<u>.</u> .	A. BASIC IDENTIF	ICATION DATA		
2.	Enter the information re	equested for the fo	llowing:			
X	Each promoter of the is	suer, if the issuer	has been organized within the	past five years:		
X			to vote or dispose, or direct the		r more of a class of	of equity securities of the
	issuer;		•	•		•
X			porate issuers and of corporate	general and managing partner	s of partnership is	ssuers; and
X	Each general and mana	ging partner of pa	rtnership issuers.		•	
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	☑ General and/or Managing Partner
	ll Name (Last name first,					
	las Capital Management,					
			Street, City, State, Zip Code)			
	O Crescent Court, Suite 81					
	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
	ll Name (Last name first,					
	IA, Inc., General Partner					
	0 Crescent Court, Suite 33		Street, City, State, Zip Code) 75201			
	eck Box(es) that Apply:		Beneficial Owner	☑ Executive Officer	□ Director	⊠ General and/or
•						Managing Partner
Fu	Il Name (Last name first,	if individual)				<u> </u>
Ro	bert H. Alpert, President	and sole Director	of the General Partner of the G	eneral Partner		
Bu	siness or Residence Addr	ess (Number and :	Street, City, State, Zip Code)	· · ·		
	0 Crescent Court, Suite 8					
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Fu	il Name (Last name first,	if individual)				Managing Partner
Bu	siness or Residence Addr	ess (Number and)	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
Fu	Il Name (Last name first,	if individual)				Managing Partner
_		0	o at a al a t			
Bu	isiness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or
						Managing Partner
Fu	Il Name (Last name first,	if individual)				
Bu	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)	· · · · ·		
Ch	neck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or
_			Denencial Owner	Executive officer		Managing Partner
Fu	Il Name (Last name first,	if individual)				
Bu	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Ch	eck Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
<u> </u>	11 Nama (Last rams Cost	iCindiala1				Managing Partner
ru _	II Name (Last name first,	ii individual)				
Bu	siness or Residence Addr	ess (Number and	Street, City, State, Zip Code)			

		***			В	. INFO)RMA	TION .	ABOU'	r off	ERING			
1. Has	the issu	er sold or		issuer i ver also							offering	?	Yes	No ⊠
2. Wh	at is the	ninimum	investm	ent that	will be a	ccepted	from a	ny indivi	idual?				\$ <u>2,600</u>	<u></u>
3. Do	3. Does the offering permit joint ownership of a single unit:												Yes ⊠	No □
indi of s regi (5)	rectly, as ecurities stered w persons t	in the of ith the SI	ission or fering. If C and/ord d are ass	similar : f a perso r with a	remuner n to be l state or :	ation for isted is a states, li	r solicita an assoc st the na	ition of partiated pe tinted of the	purchase rson or a ne broke	ers in co agent of r or deal	nnection a broke ler. If m	or with sales or dealer ore than five information	<u>م</u>	<u>.</u>
Full Nan	ne (Last	name firs	t, if indiv	vidual)										
Business	or Resid	lence Ad	dress (Ni	umber aı	nd Street	, City, S	state, Zi	p Code)				· · ·		
Name of	Associa	ed Brok	er or Dea	ler										
States in														
(Check '					ites) [CO]	[CT]	[DE]		[FL]	[GA]	[HI]	[ID]	L	All States
[IL			[KS]	[KY]	[LA]	[ME]		[MA]	[MI]	[MN]	[MS]	[MO]		
[M3				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI			[TN]	[TX]	[UT]	[VT]	-	[WA]		[WI]	[WY]	[PR]		
Full Nan	ne (Last	name firs	t, if indiv	vidual)									·-···	
Business	or Resid	lence Ad	dress (Nu	ımber aı	nd Street	, City, S	tate, Zi	Code)						
Name of	Associa	ted Broke	r or Dea	ler										
States in														
(Check '														All States
[J.L			[AR] [KS]		[CO] [LA]	[ME]	[MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[M]				[NJ]	[NM]		[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI			[TN]	[XT]	[UT]	[VT]	[VA]	[WA]		[WI]	[WY]	[PR]		
Full Nan	ne (Last	name firs	t, if indiv	vidual)										
Business	or Resid	lence Ad	dress (Ni	ımber aı	nd Street	, City, S	State, Zi _l	p Code)				·		
Name of	Associa	ted Brok	er or Dea	ler										
States in	Which I	erson Li	sted Has	Solicite	d or Inte	nds to S	olicit Pu	ırchaser	<u> </u>					
														All States
[AI				[CA]		[CT]		[DC]	[FL]	[GA]	[HI]	[ID]		
[IL			[KS]	[KY]	[LA]	[ME]	[MD]		[MI]	[MN]	[MS]	[MO]		•
[M]				[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI] [SC	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	C	Aggrega Offering P		Am	ount Already Sold
	Debt	\$	0		s	0
	Equity	S	0		S	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$			s	0
	Partnership Interests	\$ <u>57</u>	<u>,655,768.</u>	44	\$ <u>57.</u>	655,768.44
	Other (Specify)	\$	0		. s	0
	Total	\$ <u>5</u> ′	7 <u>.655,768</u>	.44	\$ <u>57.</u>	655,768.44
	Answer also in Appendix, Column 3, if filing under ULOE					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."					
			Numbe Investor		Do	Aggregate ollar Amount f Purchases
	Accredited Investors		57		\$ 57.	655,768.44
	Non-accredited Investors		0		\$	0
	Total (for filings under Rule 504 only)		N/A		s	N/A
	Answer also in Appendix, Column 4, if filing under ULOE	_			-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering		Type of		Do	ollar Amount
	D. L. FOF		Security	,		Sold
	Rule 505	_	N/A		2	N/A
	Regulation A		N/A		<u>\$</u>	N/A
	Rule 504	_	N/A		\$	N/A
	Total	_	N/A		2	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securithis offering. Exclude amounts relating solely to organization expenses of the issuer. The informable given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation r	n nay			
	Transfer Agent's Fees				S	0
	Printing and Engraving Costs				S	0
	Legal Fees			⊠	ζ	7,500
	Accounting Fees			×	<u> </u>	500
	Engineering Fees				<u> </u>	0
					- <u>-</u> -	
	Sales Commissions (specify finder's fees separately)					0
	Other Expenses (identify)				· 2—	0
	Total	•••••	•••••	\boxtimes	2	8,000

and total expenses furnished in respons	gregate offering price given in response to Part is to Part C-Question 4.a. This difference is the	"adjusted gross			\$ <u>57,647,768.44</u>
each of the purposes shown. If the am-	ted gross proceeds to the issuer used or propose ount for any purpose is not known, furnish an es . The total of the payments listed must equal the inse to Part C-Question 4.b. above.	timate and			
			Ói Dire	ments to ficers, ectors, & filiates	Payments To Others
Salaries and fees			s		\$
Purchase of real estate			s		\$
Purchase, rental or leasing and in	nstallation of machinery and equipment		s		\$
Construction or leasing of plant	buildings and facilities		s		s
	including the value of securities involved in this assets or securities of another issuer pursuant to		s		s
Repayment of indebtedness			s		s
Working capital			s		s
Other (specify) (investments)			s	⊠	\$ <u>57,647,768,44</u>
Column Totals			s	×	\$ <u>57,647,768.44</u>
Total Payments Listed (column	otals added)			\$ <u>57.</u> 6	47,768,44
	D. FEDERAL SIGNATUR				
signature constitutes an undertaking by the is	igned by the undersigned duly authorized perso suer to furnish to the U.S. Securities and Excha n-accredited investor pursuant to paragraph (b)	nge Commission,			
Issuer (Print or Type)	Signature ('amphabable)	Date	<u></u>		
Atlas Capital, L.P.	_ \(\sigma \cdot \) \(\si	October	ر 2007 بر		
Name of Signer (Print or Type) Robert H. Alpert	Title of Signer (Print of Type) A HMW MILL TW LA President of RHA, Inc., General Partner	2014 Allas Capital M	A Ianagem	ent, L.P., (General Partner
	ATTENTION	<u> </u>			

		E. STATE SIGNATURE			
1.		resently subject to any of the disqualification prov		Yes	No ⊠
	See Appendi	x, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in by state law.	which this notice is fi	led, a notice o	on Form D
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written	request, information f	urnished by th	ne issuer to
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.			
	e issuer has read this notification and knows t dersigned duly authorized person.	he contents to be true and has duly caused this not	ice to be signed on its	behalf by the	•
Iss	uer (Print or Type)	Signature	Date		
Atl	as Capital, L.P.	('arynteeplo	October 52007		
	me of Signer (Print or Type) bert H. Alpert	Title of Signer (Print or Type) Title of Signer (Print or Type) President of RHA, Inc., General Partner of Atlas	Men West	L.P. Gener	al Partner
		, , , , , , , , , , , , , , , , , , ,	8-1	,,	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		4						
	accredited St (Pa	sell to non- investors in tate rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Type o	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount				
AL											
AK							-	†			
AZ											
AR		No.	Limited Partnership Interests \$1,000,000.00	1	\$1,000,000.00	0	\$0	No.			
CA		No.	Limited Partnership Interests \$748,924.83	1	\$ 748,924.83	0	\$0	No.			
со											
СТ		No.	Limited partnership Interests \$1,300,000.00	1	\$1,300,000.00	0	\$0	No.			
DE											
DC											
FL		No.	Limited partnership Interests \$574,000.00	1	\$574,000.00	0	\$0	No.			
GA		No.	Limited Partnership Interests \$2,500,000.00	3	\$2,500,000.00	0 -	\$0	No.			
HI											
ID				_							
IL		No.	Limited Partnership Interests \$10,000.00	1	\$10,000.00	0	\$ 0	No.			
IN											
IA											

APPENDIX

1		2	3		4			5			
	accredited S (Pa	sell to non- investors in tate urt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount				
KS	1										
KY			<u> </u>								
LA											
ME		No.	Limited Partnership Interests \$2,194,500.00	2	\$2,194,500.00	o	\$0	No.			
MD		No.	Limited Partnership Interests \$100,000.00	1	\$100,000.00	0	\$0	No.			
MA		No.	Limited Partnership Interests \$1,050,000.00	1	\$1,050,000.00	o ·	\$0	No.			
MI			·								
MN		. <u>.</u> .									
MS											
МО		No.	Limited Partnership Interests \$1,525,000.00	4	\$1,525,000.00	0	\$0	No.			
MT					<u> </u>						
NE											
NV											
NH											
NJ											
NM											
NY		No.	Limited Partnership Interests \$21,275,000.00	7	\$21,275,000.00	0	\$0	No.			
NC											

APPENDIX

1		2 3 4								
	accredited S (Pa	sell to non- investors in tate art B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
ND	103	140.	micresis	Investors	Ainount	Investors	Amount			
ОН										
ок		No.	Limited Partnership Interests \$850,000.00	1	\$850,000.00	0	\$0	No.		
OR						"				
PA		No.	Limited Partnership Interests \$3,500,000.00	1	\$3,500,000.00	0	\$ 0	No.		
RI										
SC										
SD										
TN							i			
TX		No.	Limited Partnership Interests \$15,603,343.61	28	\$15,603,343.61	0	\$ 0	No.		
UT										
VT										
VA		No.	Limited Partnership Interests \$3,975,000.00	1	\$3,975,000.00	0	\$0	No.		
WA					,					
wv										
WI										
WY							σ	NOD		
PR							1II.			